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PATENT
AMENDMENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Paul S. Halvorson : Date: October 11, 2004
Group Art Unit: 2612 : IBM Corporation
Examiner: L. Ye : Intellectual Property Law
Serial No.: 09/774,731 : Dept. 917, Bldg. 006-1
Filed: January 31, 2001 : 3605 Highway 52 North
Title: METHOD AND APPARATUS FOR : Rochester, MN 55901
ENHANCING DIGITAL IMAGES WITH
TEXTUAL EXPLANATIONS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

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being deposited with the United States Postal
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addressed to: Commissioner for Patents, P.O.
Box 1450, Alexandria, VA 22313-1450, on

October 11, 2004

(Date of Deposit)

Roy W. Truelson

Date

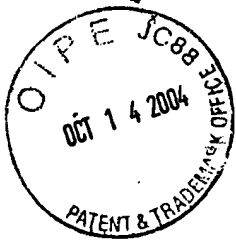
AMENDMENT

This paper is being filed in response to the office action dated July 9, 2004. Please amend
the above identified application as follows.

10/15/2004 SSESHE1 00000034 090465 09774731

01 FC:1202 54.00 DA

Docket No.: ROC9-2000-0232-US1
Serial No.: 09/774,731



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Amendment/Response Transmittal

In re application of: Paul S. Halvorson

Group Art Unit: 2612

Serial No.: 09/774,731

Examiner: L. Ye

Filed: January 31, 2001

For: METHOD AND APPARATUS FOR
 ENHANCING DIGITAL IMAGES WITH
 TEXTUAL EXPLANATIONS

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Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing is an Amendment/Response in the above-identified Application.

- ☐ No additional fee is required.
☒ The filing fee has been calculated as follows:

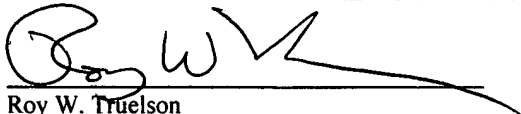
	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra
Total	23	- 20	3
Independent	4	- 5	0
<input type="checkbox"/> First Presentation of Multiple Dependent Claim			

Other Than Small Entity

Rate	Additional Fee
x \$18.00=	54.00
x \$86.00=	0.00
\$290.00	0.00
TOTAL	54.00

**CERTIFICATE OF MAILING UNDER
 37 C.F.R. 1.8(a)**

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 Alexandria, VA 22313-1450, on October 11, 2004


 Roy W. Truelson

•Request for Extension of Time:

☐ Applicants respectfully request a ____ month extension of time to respond to the Office Action dated ____/____/____. Please charge Deposit Account 09-0465 in the amount of \$ _____. A duplicate copy of this sheet is enclosed.

Deposit Account Authorization:

☐ Please charge Deposit Account No. 09-0465 in the amount of \$54.00, the Additional Fee calculated above. A duplicate copy of this sheet is enclosed.

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0465. A duplicate copy of this sheet is enclosed.

☒ Any additional filing fees required under 37 C.F.R. §1.16.

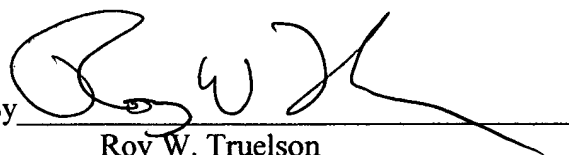
☒ Any patent application processing fees under 37 C.F.R. §1.17.

Respectfully submitted,

PAUL S. HALVORSON

Date: October 11, 2004

By



Roy W. Truelson

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